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| REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 10/816,877 |
| | Filing Date | 04/05/2004 |
| | First Named Inventor | Steven E. Strauss |
| | Art Unit | 2836 |
| | Examiner Name | Dru M. Parries |
| | Attorney Docket Number | Strauss 13 |

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

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☒ I hereby appoint the practitioners associated with the Customer Number: 46900

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 46900

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | | | |
|-----------|-------------------------------------------------------------------------------------|--|--|-----------|--------------|
| Signature |  | | | | |
| Name | Lloyd W. Sadler | | | | |
| Date | 5 Aug 2008 | | | Telephone | 610-712-2158 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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